BROWN COUNTY GOVERNMENT

Employment Application

It is the policy of Brown County Government to provide equal opportunity for applicants and employees and to recruit, hire, promote, transfer, and terminate employment without regard to race, religion, color, sexual orientation, age, national origin, disability, genetic information or any other protected category.



APPLICA	NT INFO	RMATIO	N												21	
Last Name					Firs	st					M.I.	D	ate			
Street Address									Apartment/Unit #							
City					Sta	ate					ZIP					
Phone					E-r	mail A	Address								HILL	
Date Availa	able			tomas.	Outing I					Desir	red Sala	ary				
Position Ap	plied for															
Are you a citizen of the United States? YES			NO [If no, are you authorized to w			d to wo	rk in th	e U.S.?	YES		NO			
Have you ever worked for this company? YES			YES 🔲	NO [If so, when?										
Have you ever been convicted of a felony? YES			YES 🔲	NO [If yes, explain										
	Wednes				*******				Unique sur-							
EDUCAT	ION															
High School	ol				Addre	ess										
From	Т	o	Did you	graduate?	YES		NO 🔲	Deg	ree							
College					Addre	ess										
From	Т	o	Did you	graduate?	YES		NO 🗆	Deg	ree							
Other			Addre	ess		•										
From	Т	·o	Did you g	graduate?	YES		NO 🗀	Deg	ree							
						-										
REFEREN																
Please list	three profe	ssional refe	rences.													
Full Name							R	elation	ship							
Company							P	hone								
Address																

Full Name	Relationship '	
Company	Phone	
Address		
Full Name	Relationship	
Company	Phone	
Address		••••

Describe any job-related training received in the United States military:

Indicate any foreign languages you can speak, read, or write:

List professional, trade, business or civic activities and offices held:

State any additional information you feel may be helpful to us in considering your application:
Summarize special job-related skills and qualifications acquired from employment or other experience:

PREVIOUS EMPLOYMENT	valle e e e e						
Company		Phone					
Address		Supervisor					
Job Title	Starting Salary	\$	Ending	Salary \$			
Responsibilities							
From To Reason	n for Leaving						
May we contact your previous supervisor for	a reference? YES	NO 🗆					
Company		Phone					
Address		Supervisor					
Job Title	Starting Salary	\$ Ending Salary \$					
Responsibilities			1				
From To Reason for Leaving							
May we contact your previous supervisor for	a reference? YES	NO 🗔					
Company		Phone					
Address		Supervisor					
Job Title	Starting Salary	\$	Ending	Salary \$			
Responsibilities							
From To Reaso	n for Leaving						
May we contact your previous supervisor for a reference? YES NO							
MILITARY SERVICE							
Branch			From	То			
Rank at Discharge	Type of Discharge						
If other than honorable, explain							
DISCLAIMER CERTIFICATION AND SIGNATURE							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature		Date					

Commissioner Approved 8.1.12

Background Investigation Authorization Form

In connection with my application for employment, I to procure a consumer report on me. I understand the reporting agency, and that any such report will be usefunderstand that the nature and scope of this investig limited to, various Federal, State, County and other accriminal history*, social security verification, motor vehistory, or other background checks. Credit history we related to the duties and responsibilities of the position information as to my character, general reputation, p	at investigati ed solely for ation will inc gencies that ehicle record ill only be rec on for which	ive inquiries may be ob decisions related to my lude a number of source maintain records conce is, verification of educa quested where such inflam applying. These re	employment. I also ces including, but not erning my credit history*, tion or employment formation is substantially eports will include
*Where permissible under State law.			
I understand that if the Company hires me, it may recabout me for employment-related purposes during the will be the same as the scope of a pre-employment in will be my continuing suitability for employment, or of or promotion or transfer to another position. I under employment, unless I revoke or cancel my consent by any time, stating that I revoke my consent and no long consumer reports about me.	ne course of nvestigation, whether I pos rstand that n y sending a si	my employment. The s and that the nature of ssess the minimum qua ny consent will apply fo igned letter or stateme	cope of this investigation such an investigation diffications necessary or the duration of my nt to the Company at
I hereby consent to the Company my permission to o proper identification of my file or records the following follows:			
Print name			
Other names known by			
Social security number		Date of birth	
Driver license number	_ State		
Current address			
City	State		ZIP
Applicant signature		Date	
Prospective employer			
I would like to receive a copy of any report obtained	on me by the	e Company.	

FCRA Summary of Consumer Rights

Employers in California and New York may have additional state specific notification requirements. Please see your state law for more information.

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the
 files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification,
 which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a
 free file disclosure if:
 - · a person has taken adverse action against you because of information in your credit report;
 - · you are the victim of identify theft and place a fraud alert in your file;
 - · your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - · you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness
 based on information from credit bureaus. You may request a credit score from consumer reporting agencies
 that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In
 some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that
 is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless
 your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer
 reporting agency may not report negative information that is more than seven years old, or bankruptcies that are
 more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people
 with a valid need usually to consider an application with a creditor, insurer, employer, landlord, or other
 business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give
 out information about you to your employer, or a potential employer, without your written consent given to the
 employer. Written consent generally is not required in the trucking industry. For more information, go to www.
 consumerfinance.gov/learnmore.
- · You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.

Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

I have read and understand my rights as it pertains to the Fair Credit Reporting Act (FCRA)						
	_					
Applicant/Employee Signature						
Date	<u>-</u>					
HR Manager/Personnel Manager	-					
	_					
Date						

Employer Note: Make a copy of this signed Summary of Consumer Rights form for the applicant/employee and

retain the original in the applicant/employee's file as proof of notification